

# Summary of Benefits Report for West Virginia, Medicaid

## InsureKidsNow.gov

### Preventive Services

	Is the service Covered?	Frequency	List any service - specific limitations
Cleanings	Yes	2 x year	
Fluoride treatments (including fluoride varnishes)	Yes	up to 4 x year	2 by dentist 2 by PCP
Sealants (list any tooth-specific limits)	Yes - only with prior authorization	1 x every 3 years	Tooth numbers 1-32 or A-T must be documented on the claim form for payment consideration. Requires dental areas configuration. Requires Prior Authorization with documentation
Space maintainers	Yes	up to 4 x year	Upper arch or lower arch must be included on claim form for payment consideration.

### Diagnostic Services

	Is the service Covered?	Frequency	List any service - specific limitations	Recommended age of first visit ?
Oral health screening or assessment	No			
Dental examinations	Yes		D0470 & D0474	
Assessment of risk for tooth decay	No			

### X-Rays

Bitewing	Yes		D0270Bitewing - single radiographic image4 per calendar year D0272Bitewings – two radiographic images1 per calendar year D0273Bitewings – three radiographic images1 per calendar year D0274Bitewings - four radiographic images1 per calendar year	
Full Mouth	No			
Panoramic	Yes	1 x every 3 years		

### Treatment Services

	Is the service Covered?	Frequency	List any service - specific limitations	Criteria for coverage
Anti-microbial treatments that stop decay from spreading	No			
<b>Fillings</b>				
Silver amalgam	Yes		D2140, D2150, D2160, D2161	
Tooth colored composite	No			
<b>Crowns/tooth caps</b>				
Stainless steel crowns	No			
Metal (only) crowns	Yes			
Metal/porcelain crowns	Yes			

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Treatment Services				
	Is the service Covered?	Frequency	List any service - specific limitations	Criteria for coverage
Porcelain (only) crowns	No			
<b>Root Canals (endodontics)</b>				
Root canals on baby teeth (pulpotomies)	Yes			
Root canals on permanent teeth	Yes			
<b>Gum (periodontal) therapy</b>	Yes			
<b>Dentures</b>				
Partial dentures	Yes - only with prior authorization			
Complete dentures	Yes - only with prior authorization			
Bridges	Yes - only with prior authorization			
<b>Orthodontics*</b>				
Retainers (orthodontic)	Yes - only with prior authorization			
Braces	Yes - only with prior authorization			
<b>Oral surgery</b>				
Simple extractions	Yes			
Surgical extractions	Yes			
Care of abscesses	Yes			
Cleft palate treatment	No			
Cancer treatment	No			
Treatment of fractures	Yes			
Biopsies	Yes			
<b>Treatment of jaw joint problems (TMJ)</b>	No			
<b>Emergency room services provided by a dentist</b>	Yes			
<b>Inpatient Hospital Services</b>	Yes			
<b>Anesthesia</b>				
General anesthesia	Yes			
Intravenous conscious sedation	Yes			
Non-intravenous conscious sedation	No			
Analgesia (nitrous oxide)	Yes			

\* When this information is posted on the Insure Kids Now website, we will include a special note for orthodontic services explaining that parents and caretakers should work with their child's orthodontist to ensure that the treatment and payment terms and conditions are clear at the outset of treatment (for example, what happens in the

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case of a child who becomes ineligible for Medicaid or CHIP while he or she is undergoing orthodontic treatment?).